

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicant:** KHAN  
**Docket:** 60199.0001USWO  
**Title:** Modified Vectors for Organelle Transfection

10/561829

CERTIFICATE UNDER 37 CFR 1.10:

**"Express Mail" mailing label number:** EV 495843314 US  
**Date of Deposit:** December 21, 2005

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

By: [Signature]  
Name: John Junkers

**Mail Stop PCT  
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Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ National Stage PCT Patent Application of PCT/US2004/020454: Spec. 69 pgs; 113 claims; Abstract 0 pgs.  
The fee has been calculated as shown below in the 'Claims as Filed' table.
- ☒ 10 sheets of formal drawings
- ☒ Small entity status is claimed pursuant to 37 CFR 1.27
- ☒ An unsigned Combined Declaration and Power of Attorney
- ☒ A check in the amount of \$800.00 to cover the Filing Fee
- ☒ Information Disclosure Statement, Form 1449, 1 reference(s).
- ☒ Application Data Sheet, 3 pages.
- ☒ Form PCT 1390
- ☒ Computer readable form of Sequence Listing. Applicants state that the paper copy form of the Sequence Listing section of the present application, and the computer readable form submitted herewith, are the same.
- ☒ Other: Preliminary Amendment, Certificate Regarding Sequence Listing, International Publication Page WO 2005/001062 A2, Form PCT/RO/101, Form PCT/ISA/210, Form PCT/ISA/220, Form PCT/ISA/237, Form PCT/IB/304, Form PCT/IB/308
- ☒ Return postcard

## CLAIMS AS FILED

Number of Claims Filed	No.	In Excess of		Extra		Rate		Fee
Total Claims	14	20		0		25.00	=	0.00
Independent Claims	6	3		3		100.00	=	300.00
Multiple Dependent Claims Fee							=	0.00
Basic Filing Fee							=	150.00
Search Fee							=	250.00
Examination Fee							=	100.00
Utility Application Size Fee	95	100		0		125.00	=	0.00
Total							=	800.00

00001454-11-2725 additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

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**23552**

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